

Date: August 26, 1999 File No. 0671.63110



Sir:

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Transmitted herewith for filing is the patent application of

Inventor(s): Wataru Ishisaki

MENU SYSTEM REQUIRING REDUCED USER MANIPULATION OF AN INPUT DEVICE I hereby certify that this paper is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Asst. Comm. for Patents, Washington, D.C. 20231, on this date.

August 26, 1999 Date

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Enclosed are:

- 32 pages of specification, including 12 claims and an abstract. (X)
- an executed oath or declaration, with power of attorney. (X)
- () an unexecuted oath or declaration, with power of attorney.
- _ sheet(s) of informal drawing(s). ()
- 10 sheet(s) of formal drawings(s). (X)
- Assignment(s) of the invention to FUJITSU LIMITED. (X)
- Assignment Form Cover Sheet. (X)
- A check in the amount of \$40.00 to cover the fee for recording the assignment(s) (X) is enclosed.
- Information Disclosure Statement. (X)
- Form PTO-1449 and cited references. (X)
- Associate power of attorney. (°)
- Priority Document. (X)

Fee Calculation For Claims As Filed

| | a) | Basic ree | | | | | | | | | Φ | 700.00 |
|-----|-----|-------------------------------|-------------------|--------|------|------|------------|------|-----------|-----|-----|--------|
| | b) | Independent Claims | 5 | - | 3 | = | 2 | x | \$ 78.00 | = | \$_ | 156.00 |
| | c) | Total Claims | 12 | - | 20 | = | 0 | x | \$ 18.00 | = | \$_ | |
| | d) | Fee for Multiple Claims | | | | | | | \$260.00 | = | \$_ | |
| | | | | | | | Total Fil | ling | Fee | | \$_ | 916.00 |
| () | | _ Statement(s) of Status as S | Small Enti | ity, 1 | redu | cin | g Filing F | ee t | y half to | \$_ | | |
| (X) | A c | heck in the amount of \$ 916 | <u>6.00</u> to co | over | the | fili | ng fee is | encl | osed. | | | |
| () | Cha | arge \$ to Deposit | Account 1 | No. | 07-2 | 2069 | €. | | | | | |
| | | | | | | | | | | | | |

(X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.

Suite 8660 - Sears Tower 233 S. Wacker Drive Chicago, Illinois 60606 (312) 993-0080

GREER, BURNS & CRAIN, LTD.

hathan D. Feuchtwang Registration No. 41,017

ASSISTANT COMMYSSIONER OF PATENTS AND TRADEMARKS Washington, DC 20231

PATENT Date: August 26, 1999 File No. 0671.63110

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- (X) Priority Document.

Fee Calculation For Claims As Filed

| | a) Basic Fee | | | | | \$ 760.00 |
|-----|------------------------------|--------------|-----------|----------------|----------------|--------------------|
| | b) Independent Claims | 5 | - 3 | = 2 | x \$ 78.00 | = \$ <u>156.00</u> |
| | c) Total Claims | 12 | - 20 | =0 | x \$18.00 | = \$ |
| | d) Fee for Multiple Claims | | | | \$260.00 | = \$ |
| | | | | Total Fi | ling Fee | \$ <u>916.00</u> |
| () | Statement(s) of Status as | s Small Ent | ity, redu | icing Filing I | Fee by half to | \$ |
| (X) | A check in the amount of \$9 | 16.00 to c | over the | filing fee is | enclosed. | |
| () | Charge \$ to Depos | it Account | No. 07- | 2069. | | |
| (X) | The Commissioner is hereby | outhorized t | o charge | any addition | al fees which | may be required t |

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